IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD
510 EAST 12<sup>TH</sup>, SUITE 1A
DES MOINES, IA 50319
Fax: (515)281-4073 www.iowa.gov/ethics



fowa Code section 8,7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest,

## FORM-GB

Gift or Bequest information received
by a department or accepted by the
Governor on behalf of the state

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DEPARTMENT	ひん ひととに	: KECEIVING	THE GIFT OR	RECOURSE

IA Department of Human Rights	,				
Name of Department or Office 321 E 12th Street	Des Moines IA 50319				
Mailing Address	City, State, Zip Code				
Area Code & Telephone No.					
CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OF	FICE:				
Kimberly Checks					
Name	The state of the s				
Malling Address (if different from above) kim.chceks@iowa.gov	City, State, Zip (if different from above)				
Email Address	Area Code & Telephone Number (if different from above)				
DONOR OF GIFT OR BEQUEST:					
.V**	<del></del> i				
Arnold A & Gretchen A Woods	_				
Name					
6715 Brookview Dr Urbandale IA 50322	-				
Mailing Address City, Stale, Zip Code	December 23, 2018 \$25.00				
515-778-4813	Date of Gift or Bequest Amount/Value*				
Area Code & Telephone Number	value is defined as "fair market value" of item as determined by				
arnoldawoods@gmail.com	receiving department or office. If no value mark "0.00".				
Email Address (optional)					
Provide a description of the gift or bequest and purpose thereof:					
Donation - 2019 MLK Event - "I Have a Dream" to	s he held in DSM 1/10/10				
- Common 2015 M2Nt DVOMV A THUYOU DICAMI	7 00 HQIG IN 1715/17				
ADMINISTRAÇÃO DE CONTRACTOR DE					
Criteria to use this form:	·				
Receipt of any gift or bequest that is received by any department of the	ne state or received by the Governor on behalf of the state				
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And and and Additional Property of the Control of t					
tatement of Affirmation:					
Kimberly Cheeks affirm that the gift or bequest reported at	pove is accurate. I further affirm that the information concerning the donor an				
sessment of the fair market value (if applicable) is correct and true to t	he best of my knowledge.				
11. 00 . 1	The1 21 0010 - 3				
Kim Cheeks / gor	December 31, 2018 &				
Signature $\ell$	Date				